

LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That we, **WILLIAM J. STRIFE** and **PAMELA STRIFE**, do hereby make, constitute and appoint **ERNEST M. PITT, JR., ESQ., and/or CHARLES R. HOLBROOK III, ESQ.**, 1500 Carter Avenue, Ste. 200, Ashland, Kentucky 41101, jointly, and either of them severally, as our true and lawful attorney-in-fact, for us in our capacity, name, place and stead, for the limited purposes, as follows: to close and to execute any and all documents necessary, including but not limited to: listing agreement(s), contract(s) of sale, whether with purchasers or real estate broker(s), deed of conveyance, HUD-1 Settlement Statement, and/or any other allied closing documents, including any Internal Revenue Service forms, for the sole purpose of the sale of real property situate or located at **1357 BILOXI, HERNANDO, MS 38632**; to receive and receipt for any and all monies payable to us on account of such real estate closing; and, generally to do and perform for us and in our name, place and stead all that we might or could do in the premises, if personally present; and, we hereby adopt and ratify all of the acts of our said attorney done in pursuance of the power hereby granted, as fully as if we were present acting in our own proper persons; and, provided that our said attorney is not to bind us as surety, guarantor or endorser for accommodation, nor to give away any of the estate or properties whatsoever.

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And we do give and grant unto our said attorney full power and authority to do and perform all and every act and thing whatsoever requisite, necessary and proper to be done in the foregoing premises, as fully, to all intents and purposes, as we might or could do, with full power of substitution or revocation, hereby ratifying and confirming all that our said attorney, or his substitute, shall lawfully do or cause to be done by virtue hereof.

This Power of Attorney shall not be affected by the subsequent disability or incapacity of the principal.

This Power of Attorney is for the **limited period of time** from December 18, 2002, until 11:59 P.M., June 18, 2003, and **shall automatically terminate and be revoked** at the latter time and date.

IN WITNESS WHEREOF, we have hereunto set our hand this
the 2nd day of January 2003.

William J. Strife 1-2-03
WILLIAM J. STRIFE /Date

Pamela A. Strife 1-2-03
PAMELA STRIFE /Date

STATE OF Florida)
COUNTY OF Pasco) Sct.

The foregoing Power of Attorney was subscribed and sworn to, and acknowledged before me this 2nd day of Jan, 2008, by **WILLIAM J. STRIFE** and **PAMELA STRIFE**, to be their free and voluntary act for the purposes therein expressed. *Provided MS D/L and A D/L as ID.*

My commission expires: _____.



Sharon L. Barber
MY COMMISSION # CC814789 EXPIRES
March 7, 2003
BONDED THROUGH FAIN INSURANCE, INC.

Sharon L. Barber
NOTARY PUBLIC, STATE AT LARGE
QUALIFIED IN Pasco COUNTY.

This instrument prepared by
HOLBROOK & PITT

Ant M Pitt, Jr

200 Home Federal Building
1500 Carter Avenue
Ashland, Kentucky 41101
606-324-5136